

Type 1 Diabetes Strategic Plan

- **Compiled draft with chapters for Goals 1-5 will be distributed this week**
- **Executive Committee meeting Sept 28**

FY 06 House Appropriations Report Language

“...actions the government can take that will rapidly close the disparity between treatment guidelines¹ and the care diabetics receive within the first year of being diagnosed.”

¹ The report will focus solely on HbA1c guidelines

Strategy to Prepare the Report

- Define the problem and identify factors that contribute to the disparity between HbA1c guidelines and actual treatment;
- **Identify barriers and challenges to implementation, adoption, and dissemination;**
- **Suggest possible courses of action to promote greater diffusion and adoption of the guidelines.**

DMICC Member Input

- The next DMICC meeting on December 12, 2005 will focus on the report;
- DMICC representatives will be asked to prepare the following items for incorporation into the report (to be submitted by November 15, 2005):
 - **Barriers and challenges to implementation, adoption, and/or dissemination: 2-3 sentences**
 - **Suggested ways in which your IC/agency can promote greater implementation, adoption, and/or dissemination of HbA1c guidelines: ½ page**
- Representatives will also be asked to give a brief presentation on your agency's plans.

Example Opportunity

“Seeking a better understanding of how well diabetics are managing the disease, New York City health officials have proposed that all laboratories in the city be compelled to pass along to the health department the results of [HbA1c] tests.... City officials said they hoped to use the data to coordinate intervention programs, where they would work with doctors to get patients better care.”

New York Times, June 8, 2005

Questions for Discussion

- What are unanswered questions re preventing development of risk factors for diabetes and CVD?
- Can we define a group before pre-diabetes (or pre-hypertension) that would be cost effective to intervene in?
- For diabetes prevention, when should we intervene? Before any loss of beta cell function or at time of pre-diabetes?
- What outcome measures would be meaningful? How can we demonstrate cost effectiveness of preventing development of risk factors? Could a trial be powered around reducing the 10 yr risk of CVD or DM?
- What are considerations regarding using reducing development of metabolic syndrome vs reducing 10 yr risk of CVD/DM based on risk factor score?